

FORM PFS  
COVER SHEET  
PAGE 1

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15

1	NAME
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The Honorable                      Phyllip Wayne

Stephenson

## 06/30/2019

ADDRESS / PO BOX;	APT / SUITE #;	CITY;	STATE;	ZIP
1609 N. Richmond Rd.				

Wharton, TX 77488

☐ (CHECK IF FILER'S HOME ADDRESS)

Receipt #

HD / PM

Amount
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Date Processed

AREA CODE	PHONE NUMBER;	EXTENSION
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Date Imaged

☐ CANDIDATE \_\_\_\_\_ (INDICATE OFFICE)

☒ ELECTED OFFICER State Representative, District 85 (INDICATE OFFICE)

☐ APPOINTED OFFICER \_\_\_\_\_ (INDICATE AGENCY)

☐ EXECUTIVE HEAD \_\_\_\_\_ (INDICATE AGENCY)

☐ FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT

☐ STATE PARTY CHAIR \_\_\_\_\_ (INDICATE PARTY)

☐ OTHER \_\_\_\_\_ (INDICATE POSITION)

**5** Family members whose financial activity you are reporting (see instructions).

SPOUSE \_\_\_\_\_

DEPENDENT CHILD    1. \_\_\_\_\_

                                 2. \_\_\_\_\_

                                 3. \_\_\_\_\_

In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

# SOURCES OF OCCUPATIONAL INCOME

PART 1A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 INFORMATION RELATES TO	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____
2 EMPLOYMENT	NAME AND ADDRESS OF EMPLOYER / POSITION HELD		
<input checked="" type="checkbox"/> EMPLOYED BY ANOTHER	<input type="checkbox"/> (Check if Filer's Home Address) EMPLOYER P.W. Stephenson & Co. P.C. ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1609 N. Richmond Rd. Wharton, TX 77488 POSITION HELD 100% Owner, President and Chariman of the Board		
<input type="checkbox"/> SELF-EMPLOYED	NATURE OF OCCUPATION		

# STOCK

## PART 2

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ENTITY	NAME P.W. Stephenson & Co. P.C. (Texas Corporation)			
2 STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3 NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> LESS THAN 10K	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input type="checkbox"/> 500 TO 999	<input checked="" type="checkbox"/> 1,000 TO 4,999
4 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME MFS Storage, Inc. (Texas Corporation)			
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> LESS THAN 10K	<input checked="" type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999	<input type="checkbox"/> \$25,000--OR MORE

BUSINESS ENTITY	NAME SSL Properties, LLC (Texas Limited Liability Company)			
STOCK HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
NUMBER OF SHARES	<input type="checkbox"/> LESS THAN 100 <input type="checkbox"/> LESS THAN 10K	<input type="checkbox"/> 100 TO 499 <input type="checkbox"/> 10,000 OR MORE	<input checked="" type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999	<input type="checkbox"/> \$25,000--OR MORE

# BONDS, NOTES & OTHER COMMERCIAL PAPER

## PART 3

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

List all bonds, notes, and other commercial paper held or acquired by you, your spouse, or a dependent child during the calendar year. If sold, indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 DESCRIPTION OF INSTRUMENT	Note Receivable from P.W. Stephenson & Co. P.C.
2 HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

# MUTUAL FUNDS

## PART 4

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1	MUTUAL FUND	NAME			
		Investment Professionals			
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER	<input type="checkbox"/> SPOUSE	<input type="checkbox"/> DEPENDENT CHILD _____	
3	NUMBER OF SHARES OF MUTUAL FUND	<input type="checkbox"/> LESS THAN 100	<input type="checkbox"/> 100 TO 499	<input checked="" type="checkbox"/> 500 TO 999	<input type="checkbox"/> 1,000 TO 4,999
		<input type="checkbox"/> 5,000 to 9,999	<input type="checkbox"/> 10,000 OR MORE		
4	IF SOLD	<input type="checkbox"/> NET GAIN			
	<input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999	<input type="checkbox"/> \$10,000 - \$24,999	<input type="checkbox"/> \$25,000--OR MORE

# INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS

## PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1</b> SOURCE OF INCOME	NAME AND ADDRESS
<input type="checkbox"/> Publicly held corporation	Community Bank of Texas ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 100 Texas Ave.  Boling, TX 77420
<b>2</b> RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>3</b> AMOUNT	<input checked="" type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

SOURCE OF INCOME	NAME AND ADDRESS
<input type="checkbox"/> Publicly held corporation	Prosperity Bank ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 143 W. Burleson  Wharton, TX 77488
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

SOURCE OF INCOME	NAME AND ADDRESS
<input type="checkbox"/> Publicly held corporation	Investment Professionals ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1614 San Pedro, Suite 150  San Antonio, TX 78232
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input checked="" type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

SOURCE OF INCOME	NAME AND ADDRESS
<input checked="" type="checkbox"/> Publicly held corporation	NRG Crude Gathering, Inc ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
RECEIVED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
AMOUNT	<input type="checkbox"/> \$500 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input checked="" type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

# PERSONAL NOTES AND LEASE AGREEMENTS

## PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Community Bank for SSL Properties
2 LIABILITY OF	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
3 GUARANTOR	Stephenson, Phyllip
4 AMOUNT	<input type="checkbox"/> \$1,000 - \$4,999 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

# INTEREST IN BUSINESS ENTITIES

## PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

<b>1</b> HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
<b>2</b> DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) P.W. Stephenson & Co. P.C., Certified Public Accountants 1609 N. Richmond Rd.  Wharton, TX 77488
<b>3</b> IF SOLD <input type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) MFS Storage, Inc. 1609 N. Richmond Rd.  Wharton, TX 77488
IF SOLD <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) SSL Properties, LLC 1609 N. Richmond Rd.  Wharton, TX 77488
IF SOLD <input checked="" type="checkbox"/> NET GAIN <input type="checkbox"/> NET LOSS	<input type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input checked="" type="checkbox"/> \$25,000--OR MORE

HELD OR ACQUIRED BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____
DESCRIPTION	NAME AND ADDRESS <input type="checkbox"/> (Check if Filer's Home Address) Integra Fuel Co., Ltd. P.O. Box 2375  Bay City, TX 77404
IF SOLD <input type="checkbox"/> NET GAIN <input checked="" type="checkbox"/> NET LOSS	<input checked="" type="checkbox"/> LESS THAN \$5,000 <input type="checkbox"/> \$5,000 - \$9,999 <input type="checkbox"/> \$10,000 - \$24,999 <input type="checkbox"/> \$25,000--OR MORE



# OWNERSHIP OF BUSINESS ASSOCIATIONS

## PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) P.W. Stephenson & Co., PC 1609 N. Richmond Rd.  Wharton, TX 77488		
2 BUSINESS TYPE	<input type="checkbox"/> Corporation <input type="checkbox"/> Firm <input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Partnership <input checked="" type="checkbox"/> Professional Corporation	<input type="checkbox"/> Profesional Association <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other _____
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____		

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) SSL Properties 1609 N. Richmond Rd.  Wharton, TX 77488		
2 BUSINESS TYPE	<input type="checkbox"/> Corporation <input type="checkbox"/> Firm <input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Professional Corporation	<input type="checkbox"/> Profesional Association <input type="checkbox"/> Joint Venture <input checked="" type="checkbox"/> Other _____
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____		

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) MFS Storage, Inc. 1609 N. Richmond Rd.  Wharton, TX 77488		
2 BUSINESS TYPE	<input type="checkbox"/> Corporation <input type="checkbox"/> Firm <input type="checkbox"/> Partnership	<input type="checkbox"/> Limited Partnership <input type="checkbox"/> Limited Liability Partnership <input type="checkbox"/> Professional Corporation	<input type="checkbox"/> Profesional Association <input type="checkbox"/> Joint Venture <input checked="" type="checkbox"/> Other _____
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____		

# ASSETS OF BUSINESS ASSOCIATIONS

## PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) P.W. Stephenson & Co., PC 1609 N. Richmond Rd.  Wharton, TX 77488																												
2 BUSINESS TYPE	Professional Corporation																												
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____																												
4 ASSETS	<table><thead><tr><th>DESCRIPTION</th><th colspan="2">CATEGORY</th></tr></thead><tbody><tr><td>Cash &amp; Cash Equivalents</td><td><input type="checkbox"/> LESS THAN \$5,000</td><td><input type="checkbox"/> \$5,000 - \$9,999</td></tr><tr><td></td><td><input type="checkbox"/> \$10,000 - \$24,999</td><td><input checked="" type="checkbox"/> \$25,000 OR MORE</td></tr><tr><td>Accounts Receivable-Trade</td><td><input type="checkbox"/> LESS THAN \$5,000</td><td><input type="checkbox"/> \$5,000 - \$9,999</td></tr><tr><td></td><td><input type="checkbox"/> \$10,000 - \$24,999</td><td><input checked="" type="checkbox"/> \$25,000 OR MORE</td></tr><tr><td>Office Equipment</td><td><input type="checkbox"/> LESS THAN \$5,000</td><td><input type="checkbox"/> \$5,000 - \$9,999</td></tr><tr><td></td><td><input type="checkbox"/> \$10,000 - \$24,999</td><td><input checked="" type="checkbox"/> \$25,000 OR MORE</td></tr><tr><td>Customer List</td><td><input type="checkbox"/> LESS THAN \$5,000</td><td><input type="checkbox"/> \$5,000 - \$9,999</td></tr><tr><td></td><td><input type="checkbox"/> \$10,000 - \$24,999</td><td><input checked="" type="checkbox"/> \$25,000 OR MORE</td></tr></tbody></table>		DESCRIPTION	CATEGORY		Cash & Cash Equivalents	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000 OR MORE	Accounts Receivable-Trade	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000 OR MORE	Office Equipment	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000 OR MORE	Customer List	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000 OR MORE
DESCRIPTION	CATEGORY																												
Cash & Cash Equivalents	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999																											
	<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000 OR MORE																											
Accounts Receivable-Trade	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999																											
	<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000 OR MORE																											
Office Equipment	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999																											
	<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000 OR MORE																											
Customer List	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999																											
	<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000 OR MORE																											

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) SSL Properties 1609 N. Richmond Rd.  Wharton, TX 77488										
2 BUSINESS TYPE	Other Business Association										
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____										
4 ASSETS	<table><thead><tr><th>DESCRIPTION</th><th colspan="2">CATEGORY</th></tr></thead><tbody><tr><td>Cash and Savings</td><td><input type="checkbox"/> LESS THAN \$5,000</td><td><input checked="" type="checkbox"/> \$5,000 - \$9,999</td></tr><tr><td></td><td><input type="checkbox"/> \$10,000 - \$24,999</td><td><input type="checkbox"/> \$25,000 OR MORE</td></tr></tbody></table>		DESCRIPTION	CATEGORY		Cash and Savings	<input type="checkbox"/> LESS THAN \$5,000	<input checked="" type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input type="checkbox"/> \$25,000 OR MORE
DESCRIPTION	CATEGORY										
Cash and Savings	<input type="checkbox"/> LESS THAN \$5,000	<input checked="" type="checkbox"/> \$5,000 - \$9,999									
	<input type="checkbox"/> \$10,000 - \$24,999	<input type="checkbox"/> \$25,000 OR MORE									

# ASSETS OF BUSINESS ASSOCIATIONS

## PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

Rental Building-Wharton TX

☐

LESS THAN \$5,000

☐

\$5,000 - \$9,999

☐

\$10,000 - \$24,999

☒

\$25,000 OR MORE

# LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)  P.W. Stephenson & Co., PC 1609 N. Richmond Rd.  Wharton, TX 77488																												
2 BUSINESS TYPE	Professional Corporation																												
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____																												
4 LIABILITIES	<table border="1"> <thead> <tr> <th data-bbox="435 774 980 808">DESCRIPTION</th> <th colspan="2" data-bbox="980 774 1534 808">CATEGORY</th> </tr> </thead> <tbody> <tr> <td data-bbox="435 808 980 926">Accounts Payable-Trade</td> <td data-bbox="980 808 1263 856"><input type="checkbox"/> LESS THAN \$5,000</td> <td data-bbox="1263 808 1534 856"><input checked="" type="checkbox"/> \$5,000 - \$9,999</td> </tr> <tr> <td data-bbox="435 856 980 926"></td> <td data-bbox="980 856 1263 905"><input type="checkbox"/> \$10,000 - \$24,999</td> <td data-bbox="1263 856 1534 905"><input type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td data-bbox="435 926 980 1043">Note Payable-Phyllip W. Stephenson</td> <td data-bbox="980 926 1263 974"><input type="checkbox"/> LESS THAN \$5,000</td> <td data-bbox="1263 926 1534 974"><input type="checkbox"/> \$5,000 - \$9,999</td> </tr> <tr> <td data-bbox="435 974 980 1043"></td> <td data-bbox="980 974 1263 1022"><input type="checkbox"/> \$10,000 - \$24,999</td> <td data-bbox="1263 974 1534 1022"><input checked="" type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td data-bbox="435 1043 980 1161">Note Payable-Expertplan</td> <td data-bbox="980 1043 1263 1092"><input type="checkbox"/> LESS THAN \$5,000</td> <td data-bbox="1263 1043 1534 1092"><input type="checkbox"/> \$5,000 - \$9,999</td> </tr> <tr> <td data-bbox="435 1092 980 1161"></td> <td data-bbox="980 1092 1263 1140"><input checked="" type="checkbox"/> \$10,000 - \$24,999</td> <td data-bbox="1263 1092 1534 1140"><input type="checkbox"/> \$25,000--OR MORE</td> </tr> <tr> <td data-bbox="435 1161 980 1291">Net Worth</td> <td data-bbox="980 1161 1263 1209"><input type="checkbox"/> LESS THAN \$5,000</td> <td data-bbox="1263 1161 1534 1209"><input type="checkbox"/> \$5,000 - \$9,999</td> </tr> <tr> <td data-bbox="435 1209 980 1291"></td> <td data-bbox="980 1209 1263 1257"><input type="checkbox"/> \$10,000 - \$24,999</td> <td data-bbox="1263 1209 1534 1257"><input checked="" type="checkbox"/> \$25,000--OR MORE</td> </tr> </tbody> </table>		DESCRIPTION	CATEGORY		Accounts Payable-Trade	<input type="checkbox"/> LESS THAN \$5,000	<input checked="" type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input type="checkbox"/> \$25,000--OR MORE	Note Payable-Phyllip W. Stephenson	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000--OR MORE	Note Payable-Expertplan	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999		<input checked="" type="checkbox"/> \$10,000 - \$24,999	<input type="checkbox"/> \$25,000--OR MORE	Net Worth	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000--OR MORE
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1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address)  SSL Properties 1609 N. Richmond Rd.  Wharton, TX 77488										
2 BUSINESS TYPE	Other Business Association										
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____										
4 LIABILITIES	<table border="1"> <thead> <tr> <th data-bbox="435 1715 980 1749">DESCRIPTION</th> <th colspan="2" data-bbox="980 1715 1534 1749">CATEGORY</th> </tr> </thead> <tbody> <tr> <td data-bbox="435 1749 980 1866">Mortgage Note-Community State Bank of Texas</td> <td data-bbox="980 1749 1263 1797"><input type="checkbox"/> LESS THAN \$5,000</td> <td data-bbox="1263 1749 1534 1797"><input type="checkbox"/> \$5,000 - \$9,999</td> </tr> <tr> <td data-bbox="435 1797 980 1866"></td> <td data-bbox="980 1797 1263 1845"><input type="checkbox"/> \$10,000 - \$24,999</td> <td data-bbox="1263 1797 1534 1845"><input checked="" type="checkbox"/> \$25,000--OR MORE</td> </tr> </tbody> </table>		DESCRIPTION	CATEGORY		Mortgage Note-Community State Bank of Texas	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999		<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000--OR MORE
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Mortgage Note-Community State Bank of Texas	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999									
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# LIABILITIES OF BUSINESS ASSOCIATIONS

## PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and **DO NOT** include this page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet.

	Net Worth	<input type="checkbox"/> LESS THAN \$5,000	<input type="checkbox"/> \$5,000 - \$9,999
		<input type="checkbox"/> \$10,000 - \$24,999	<input checked="" type="checkbox"/> \$25,000--OR MORE
1 BUSINESS ASSOCIATION	NAME AND ADDRESS <input type="checkbox"/> (Check If Filer's Home Address) MFS Storage, Inc. 1609 N. Richmond Rd.  Wharton, TX 77488		
2 BUSINESS TYPE	Other Business Association		
3 HELD, ACQUIRED, OR SOLD BY	<input checked="" type="checkbox"/> FILER <input type="checkbox"/> SPOUSE <input type="checkbox"/> DEPENDENT CHILD _____		
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# PERSONAL FINANCIAL STATEMENT

PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS  
COVER SHEET  
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. ***If you place a check in a box, do NOT include pages for that Part in the report.***

## 6 PARTS NOT APPLICABLE TO FILER

- ☐ N/A Part 1A - Sources of Occupational Income
- ☒ N/A Part 1B - Retainers
- ☐ N/A Part 2 - Stock
- ☐ N/A Part 3 - Bonds, Notes & Other Commercial Paper
- ☐ N/A Part 4 - Mutual Funds
- ☐ N/A Part 5 - Income from Interest, Dividends, Royalties & Rents
- ☐ N/A Part 6 - Personal Notes and Lease Agreements
- ☒ N/A Part 7A - Interests in Real Property
- ☐ N/A Part 7B - Interests in Business Entities
- ☒ N/A Part 8 - Gifts
- ☒ N/A Part 9 - Trust Income
- ☒ N/A Part 10A - Blind Trusts
- ☒ N/A Part 10B - Trustee Statement
- ☐ N/A Part 11A - Business Associations
- ☐ N/A Part 11B - Assets of Business Associations
- ☐ N/A Part 11C - Liabilities of Business Associations
- ☒ N/A Part 12 - Boards and Executive Positions
- ☒ N/A Part 13 - Expenses Accepted Under Honorarium Exception
- ☒ N/A Part 14 - Interest in Business in Common with Lobbyist
- ☒ N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
- ☒ N/A Part 16 - Representation by Legislator Before State Agency
- ☒ N/A Part 17 - Benefits Derived from Functions Honoring Public Servant
- ☒ N/A Part 18 - Legislative Continuances
- ☒ N/A Part 19 - Contracts with Governmental Entity
- ☒ N/A Part 20 - Bond Counsel Services Provided by a Legislator

# PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. Without proper verification, the statement is not considered filed.

The verification page on a personal statement filed electronically with the Texas Ethics Commission must have the electronic signature of the individual required to file the personal financial statement.

The verification page on a personal financial statement filed with an authority other than the Texas Ethics Commission must have the signature of the individual required to file the personal financial statement as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018 , and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

The Honorable Phyllip Wayne Stephenson

Signature of Filer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath